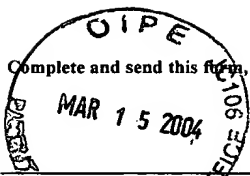


03-16-04



PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to:

Mail Mail Stop ISSUE Fee
Commissioner for Patents
P.O. Box 1450
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INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 4 should be completed where appropriate. All further correspondence regarding the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notification.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

WOODCOCK WASHBURN LLP
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DATE OF DEPOSIT: March 15, 2004

EV386720212US

APPLICATION NO. 09/810,810	FILING DATE 03/16/2001	FIRST NAMED INVENTOR Graeme N. McClure	ATTORNEY DOCKET NO. ABMS-0119/B000330	CONFIRMATION NO. 6799
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TITLE OF INVENTION: ONE OR ALL PHASES RECLOSER CONTROL

APPLN. TYPE nonprovisional	SMALL ENTITY NO	ISSUE FEE \$1,330	PUBLICATION FEE \$300	TOTAL FEE(S) DUE \$1,630	DATE DUE 03/22/2004
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EXAMINER Anthony T. Dougherty	ART UNIT 2863	CLASS-SUBCLASS
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1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents.
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1 Woodcock Washburn LLP

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type).

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

ABB TECHNOLOGY AG

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Zurich, Switzerland

Please check the appropriate assignee category indicated below (will not be printed on the patent)

☐ individual ☒ corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed

4b. Payment of Fee(s):

<input checked="" type="checkbox"/> Issue Fee	<input checked="" type="checkbox"/> A check in the amount of the fee(s) is enclosed Please charge any deficiency to Deposit Account No. 23-3050
<input checked="" type="checkbox"/> Publication Fee	<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-3050 (enclosed is an extra copy of this form)
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Jonathan M. Waldman Reg. No. 40,861

(Authorized Signature)

(Date) MARCH 15, 2004

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03/17/2004 GWORDOF2 00000093 09810810

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